

**EXHIBIT “10”**

NEW YORK STATE

DRIVER LICENSE CLASS D

ID: 576 276 119



MUNERA  
JOYCE J  
10 MEADOW WAY  
WHITE PLAINS NY 10605  
DOB: 01-05-45 HT: 5-04  
SEX: F EYES: GR HT: 5-04  
E: NONE  
ISSUED: 09-13-11 EXPIRES: 01-08-20  
E54W1R5209

*Joyce J. Munera*

Department of Finance  
255 Main Street  
White Plains, NY 10601  
Tel: (914) 422-1239 Fax (914) 422-1273

**Date:** June 14, 2013

**Account: 80442**

**Period: 07/01/2013 – 09/30/2013****Payment Due: July 10, 2013**

JOYCE MUNERA  
10 MEADOW WAY  
WHITE PLAINS, NY 10605

DESCRIPTION	AMOUNT
Balance Forward – 07/01/2013	0.00
Billing – 07/01/2013 through 09/30/2013	427.18
Payment Received	0.00
TOTAL	\$427.18

fd online 4/15/13

Please make check payable to **City of White Plains**, write account number **80442** on your check, and send your payment by the due date to: **City of White Plains, Department of Finance, 255 Main Street, White Plains, NY 10601.**

Department of Finance  
255 Main Street  
White Plains, NY 10601  
Tel: (914) 422-1239 Fax (914) 422-1273

**Payment Due: April 10, 2014**

JOYCE MUNERA  
10 MEADOW WAY  
WHITE PLAINS, NY 10605

HL 3/18/14  
On 1/2

Please make check payable to *City of White Plains*, write account number *80442* on your check, and send your payment by the due date to: **City of White Plains, Department of Finance, 255 Main Street, White Plains, NY 10601.**

**CITY OF WHITE PLAINS**

Department of Finance  
255 Main Street  
White Plains, NY 10601  
Tel: (914) 422-1239 Fax (914) 422-1273

**HEALTH CARE  
PREMIUM CONTRIBUTION  
INVOICE****Date:** December 16, 2013**Account:** 80442**Period:** 01/01/2014 – 03/31/2014**Payment Due:** January 10, 2014

JOYCE MUNERA  
10 MEADOW WAY  
WHITE PLAINS, NY 10605

DESCRIPTION	AMOUNT
Balance Forward – 07/01/2013	0.00
Billing – 07/01/2013 through 09/30/2013	427.18
Payment Received	(427.18)
Billing – 10/01/2013 through 12/31/2013	427.18
Payment Received	(427.18)
Billing – 01/04/2014 through 03/31/2014*	444.91
Payment Received	0.00
*Changes in premium rates are based on plan contract renewals effective January 1, 2014	
<b>TOTAL</b>	<b>\$444.91</b>

Please make check payable to *City of White Plains*, write account number **80442** on your check, and send your payment by the due date to: **City of White Plains, Department of Finance, 255 Main Street, White Plains, NY 10601.**

*John A. ...*